

## PART B - FEE(S) TRANSMITTAL



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FIRST NAMED INVENTOR

Craig Cless

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7590 05/17/2005

AUG 1 7 2005

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08/18/2005 ABEYENE2 00000098 10701068

01 FC:1501 1400.00 DP 02 FC:1504 300.00 DP 03 FC:800 PPLICATION NO. FILING BARR OP

10/701,068 11/05/2003

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CONFIRMATION NO

6311

ATTORNEY DOCKET NO.

6666.140

TITLE OF INVENTION: METAL FELT LAMINATES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FE	E TOTAL	FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300		\$1700	08/17/2005
EXAMINER		ART UNIT		CLASS-SUBCLASS	1		
ZIMMERMAN, JOHN J		1775	1775 428-608000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively.  (2) the name of a single firm (having as a member a				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
• PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGN	(B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Material S	ciences Corpo	oration		Elk Grove	Village,	IL	
Please check the appropriate assignce category or categories (will not be printed on the patent): 🚨 Individual X 🖾 Corporation or other private group entity 🚨 Government							
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):							
XX stue Fee XX A check in the amount of the fee(s) is enclosed.							
Yublication Fee (No	Mublication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.						
X Advance Order - # o			The Director is hereby-authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0548 (enclose an extra copy of this form).				
9	s (from status indicated above SMALL ENTITY status, See	•	🗀 b. Applic	cant is no longer claiming	g SMALL ENTITY	' status. See 37 C	CFR 1.27(g)(2).

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Authorized Signature

Date 8/17/2005

Typed or printed name Joseph W. Berenato, III

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